K	Ce fin	ed Ma	16/06			٠.	٠	٠.						
7.1	Under the Pape	ATENT APP	Act of 1995, no p PLICATION	FEE DI	required to res	spond ATIO	U.S. Pate to a collecti N REC	nt and T	Approved comation un	lor use th flice; U.S. less it disp	rough 7/31 DEPARTI	PTO 1/2006, 0! MENT OF MOMB M	188/06 (12- 18 0651-00 COMMER	04) 132 CE
	Substitute form PTO-875										Application or Docket Humber			
•	APPLICATION AS FILED - PART ((Column 1) (Column 2) SMALL ENTITY									170	1849	788	2_	-
	FOR		JMBER FILED	T :			51	MALL E	MITTY	OR -	S)THER 1 MALL EI	HAN TITY	1
	BASIC FEE. (37 CFR 1.16(e), (b), SEARCH FEE	_		1 111	MOER EXTRA	\dashv	RATE	(1)	FEED		ŔĄŢĘ	7	FEE (\$)	+
	(37 CFR 1.16(K), (1), C	<u>c</u>						-	273	1			790]
	(37 CFR 1.16(0), (p), TOTAL CLAIMS	ox (q1)	01-											
	(37 CFR 1.16(1)) INDEPENDENT CL (37 CFR 1.16(h))	AIMS 3	7 minus 20 =	<u> -</u>			× 25	_	1.	OR	(57)		+]
1	APPLICATION SIZE	If the s	pecification and	drawing	s exceed 100		×/0) =		OIL	× 900) =	+-	
	FEE (37 CFR 1.16(s))	ls \$250	(\$125 for small	entity) f	i-size-fee-due or each		÷	-				-	:	
-	35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(f))													
	If the difference in a				12.			+	+-1	Ļ	360			•
	APPL	ICATION AS	AMENDED -	PARTH	ı	•••		L			TOTAL	179	1000	_
F	1	CLAIMS			"(Column: 3)	- 	SMAL	L ENTI	ITY''	. O.A	OTHE	ER THAN	,	
	1/28/96	REMAINING AFTER AMENDMENT	PRE	SHEST IMBER /IOUSLY D FOR	PRESENT EXTRA	\int	RATE (\$)	A	NODI- ONAL		LSIVAC RATE (S)	CENTIT	<u> </u>	
(5	in idel	37	Minus 3	7	= B	 -,	25		E (S)	-	•	TIO		
` ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	137 CFR 1 16419	G Teadra geniga		5	10	1	100				100	0	006	
-	FIRST PRESENTALOR OF MULTIPLE DEFENDENT CLAM (ST CFR : 120) / 180											0	05	
-			:				OTAL DOLFEE	1	°	7 3 707	60	0.6	00	
-	1	(Colubra 1)	(Col	umr2): -	(Column:3)						TFEE	20	24	
NT B	1	TCIAIMS REMAINING AFTER MENDINERS	HIGH HEVIC PREVIO	EST-T	PESSINT EVIKA		ATT IS	-2:						
N.	1, test 11/10		PAID	# 3#		-	1	1 1 1 1			₹-3. Î	* : : : :		
AMENDM	107 CFR 1.16(N)		Minors +aa:			1.0	00			3	0	·	i	
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	If the entry in column If the Highest Num If the Highest Num If the Highest Num The Highest Num If the Highe	in-1 is less than (f	ie entry in column	2. wite n	in column 3.		LFEF		OR	JATC: LJ'OOA	:ce		7	
	If the Highest Number Highest Number Highest Number Number 10 August 10 Augu			TALLE 16 V.	45 (han 30	er "20" "3". Number	found in th						'	

The Highest Number Previously Paid For IN THIS SPACE is was than 3, enter '3'.

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the Custom particular), and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any complete, and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2